

Bi-Weekly BDDS Meeting for Case Managers and Providers August 26, 2020



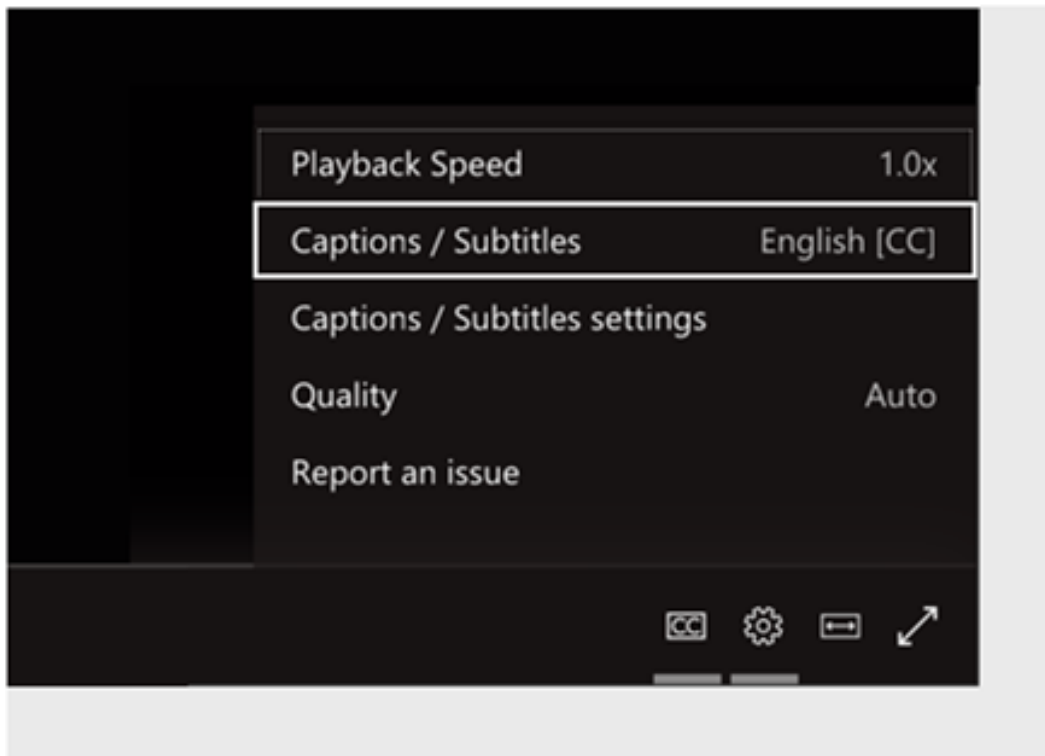
Before We Get Started...



How to Use Live Captions

To turn on live captions and subtitles, select **Captions/Subtitles On**  in your video controls.

To change the caption language, select **Settings**  > **Captions / Subtitles**, and choose the language you want.





How to Ask a Question

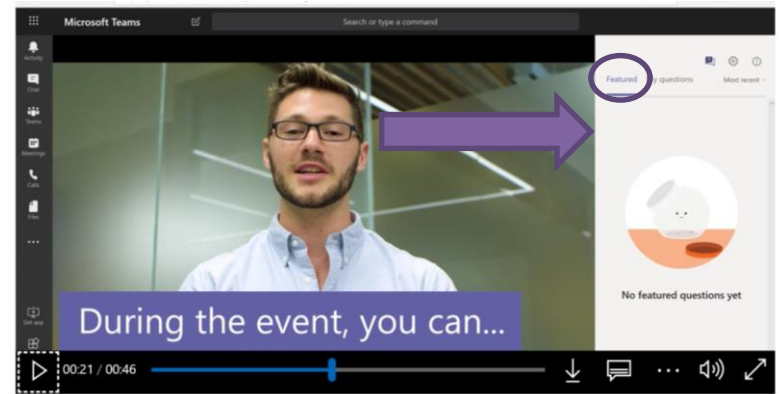
- 1.) Select Q&A on the right side of the screen
- 2.) Type your question in the compose box, and then select Send.
- 3.) Your question will only be visible to the presenters
- 4.) Questions will be answered as time permits.





How to Sign-In for Today's Meeting

- 1.) Look for the Q&A box on the right side of the screen.
- 2.) Under the Featured list, look for the link to the sign-in sheet.
- 3.) Select the link, fill-in the form, and click complete.



Welcome and Today's Agenda

- Introductions
- DDRS Goals
- Employment Support - Theresa Koleszar, Bureau of Rehabilitation Services
- COVID-19 Data Update
- Appendix K Updates
- COVID-19 Best Practices - Communication
- System Transformation Updates



DDRS Goals for COVID-19 Efforts

Help prevent the spread of COVID-19 and keep people alive

Operationalize flexibilities

Provider network maintained

Empower person-centered decision-making for self-advocates, families, case managers, and providers



Image by: McChrystal Group & NASDDDS



DDRS Provider Webinar

August 26, 2020

Vocational Rehabilitation Update

Theresa Koleszar, Director
Bureau of Rehabilitation Services



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Update

- COVID-19 employment status questionnaire
 - Authorizations issued to VR employment service providers to reach VR participants
 - To better understand the impact of the pandemic on the employment status of VR participants
 - To facilitate individual conversations with VR participants to identify individual needs, e.g. support with adapting to new employer protocols, finding new employment, etc.



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Update

- COVID-19 employment status questionnaire summary of results
 - As of August 24, 2020, 744 questionnaires completed
 - 15% reported laid off, 40% furloughed, 2% working remotely due to COVID-19
 - 4% reported they were terminated for other reasons, and 11% reported that they quit working
 - Only 1/3 reported no impact on employment due to COVID



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Service Delivery

- VR referrals and applicants have started to increase but are still lower than pre-COVID levels
- Encourage re-engagement of current VR participants
- Encourage referrals to VR - new or returning
- Help us increase awareness that VR services continue to be available



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Service Delivery - How can VR help?

- Need to change job goal due to COVID?
- Lost employment and need help finding new employment?
- Adjusting to working remotely and need some support to successfully perform job duties?
- Returning to work and need support in understanding new protocols, changes to duties, shift in natural supports, etc.?
- Ready to begin the discovery process?



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Service Delivery Update

- Many VR services continue to be offered remotely
- In-office appointments resumed July 6, 2020 for specific types of activities
 - Plexiglas
 - Masks
 - Office cleanings
 - Limiting number of people in the office
 - Considerations for staff and participants at risk



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Service Impact

**What have been the biggest barriers to
providing services to individuals during the
pandemic?**

*Specifically, services to VR participants, but all
feedback welcome!*



Bureau of Rehabilitation Services - Vocational Rehabilitation

COVID-19 Service Impact

What have been the most significant opportunities or positive outcomes in serving individuals during the pandemic?

Specifically, services to VR participants, but all feedback welcome!



Bureau of Rehabilitation Services - Vocational Rehabilitation

Training News

- Training needs assessment completed
- 225 staff from VR employment service provider agencies responded
- Top training needs reported:
 - Serving individuals with mental health diagnosis
 - Virtual service delivery
 - Transitioning individuals out of subminimum wage employment
- Public Consulting Group is contracted with VR to provide training to VR employment service providers
 - Classroom or webinar based training - foundational and topical
 - Coaching network



Bureau of Rehabilitation Services - Vocational Rehabilitation

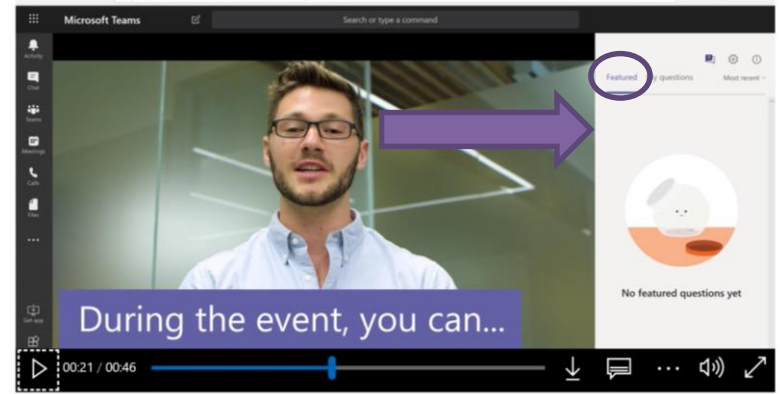
Questions?





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COVID-19 Data:

Total Number of BDDS COVID Positive Cases



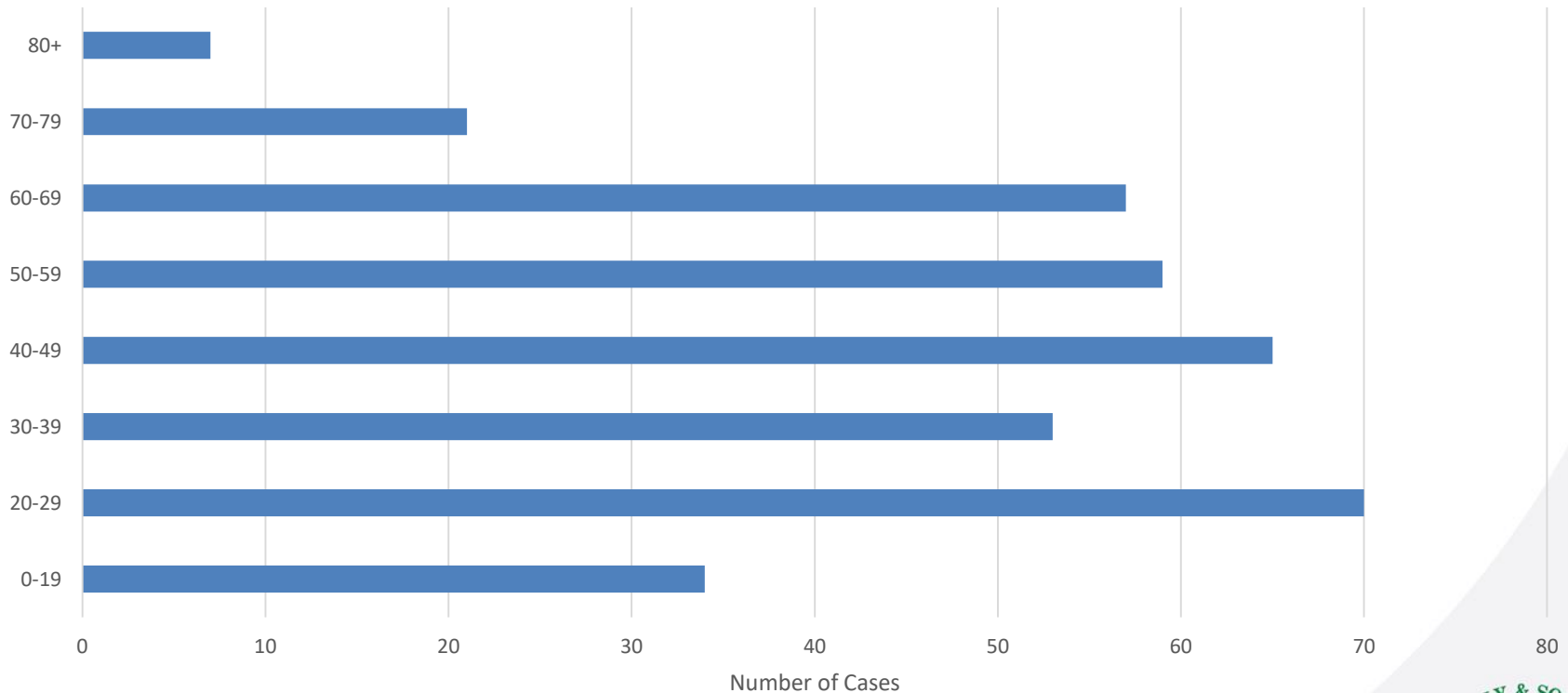
Total Cases: 369
Total COVID-Related Deaths: 15



COVID-19 Data: Age Among Unique COVID Positive Cases

Age (Group)

Number of Cases



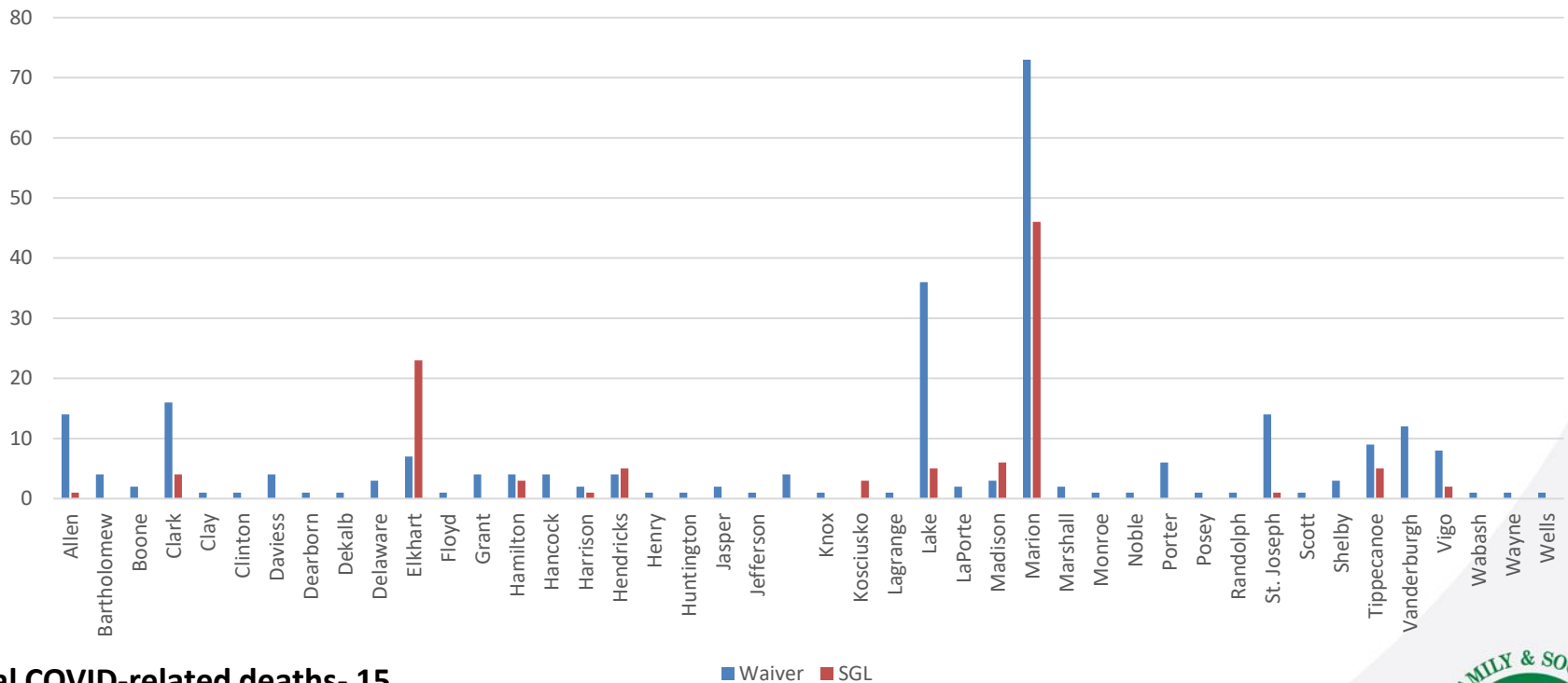
COVID-19 Data: Positive Individual Cases by County and Funding Type

Positive Individual Cases

by County/Funding Type

Total Cases = 369

Data as of 8/24/2020



Total COVID-related deaths- 15



Appendix K Updates

- Updates to Appendix K have been submitted
- New Appendix K flexibilities will be effective from September 1 - December 31, 2020
- Please be mindful of which flexibilities expire on August 31
- New guidance will be released prior to September 1



Appendix K Highlights

- Telemedicine option extended for individuals/families who request it
- Resuming enrollment of new providers
- Resuming provider re-verification
- Removed flexibility allowing current providers to be an approved respite provider
Removed respite from Food & Rent for Unrelated Caregivers



Appendix K Highlights

- Paid parent caregivers of minors:
 - will be allowable when the minor child and/or current direct support professional have tested positive for or a confirmed exposure of COVID-19 exists. Up to 40 hours but not exceeding current plan approved units and up to 30 consecutive days per occurrence
 - PAC, Day Habilitation & RHS only
 - May not be used to supplant or replace services that would otherwise be funded by and the responsibility of another funding source, such as a school district, to provide*
- Adult Spouses as paid caregiver:
 - will be allowable when the individual and/or current direct support professional have tested positive for or a confirmed exposure of COVID-19 exists. Up to 40 hours but not exceeding current plan approved units and up to 30 consecutive days per occurrence
 - PAC & SFC only



Appendix K Highlights

- Sleep staff
 - Allow for staff to stay overnight in the residence in emergent situations where an individual has been quarantined to their home with staff due to COVID-19 exposure or positive testing, and no other staff or means to support the individual have been established (remote supports, family or natural supports).
 - Allows for a maximum of 30 days from the initial determination. During this time period the team will be required to determine and plan for alternate supports as soon as feasible.



Appendix K Highlights

- 40 hour rule
 - Updated to reflect changes in renewal
 - RHS & PAC may be provided in excess of 40 hours per week per paid relative to adults when the individual and/or current direct support professional tested positive for COVID-19 up to a total of 30 consecutive days per occurrence.



Appendix K Highlights

- Criminal History Checks
 - Will accept a copy of a limited criminal history check conducted through the Indiana Central Repository within the last 6 months from another entity
 - To address delays in receiving limited criminal history checks, the provider may hire without having the completed check.
 - However, they must be able to document that they have REQUESTED the limited criminal history check prior to hire
 - And, document that the employee has successfully completed checks through:
 - County level criminal history check
 - ISDH nurse aide registry
 - OIG-HHS Exclusion Database



Reminder: COVID-19 Best Practices for Communication Among Team Members

We all have a responsibility to each other to keep the ALL healthy and safe

Team members, providers, family members, individuals and staff should notify ALL team members when:

- An individual in the home is suspected of having COVID-19 (showing symptoms and/or following quarantine procedures)
- An individual in the home is being tested for COVID-19
- An individual has tested positive for COVID-19
- A staff member or therapist is suspected of or tested positive for COVID-19 while working in or visiting the home.

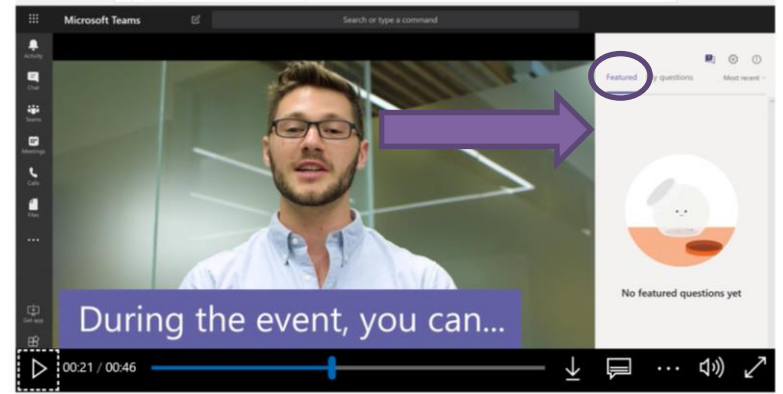
In addition to helping keeping the ALL healthy and safe, it is important for the team to consider if the individual has had a change in condition and whether there is a need to modify their current service array.





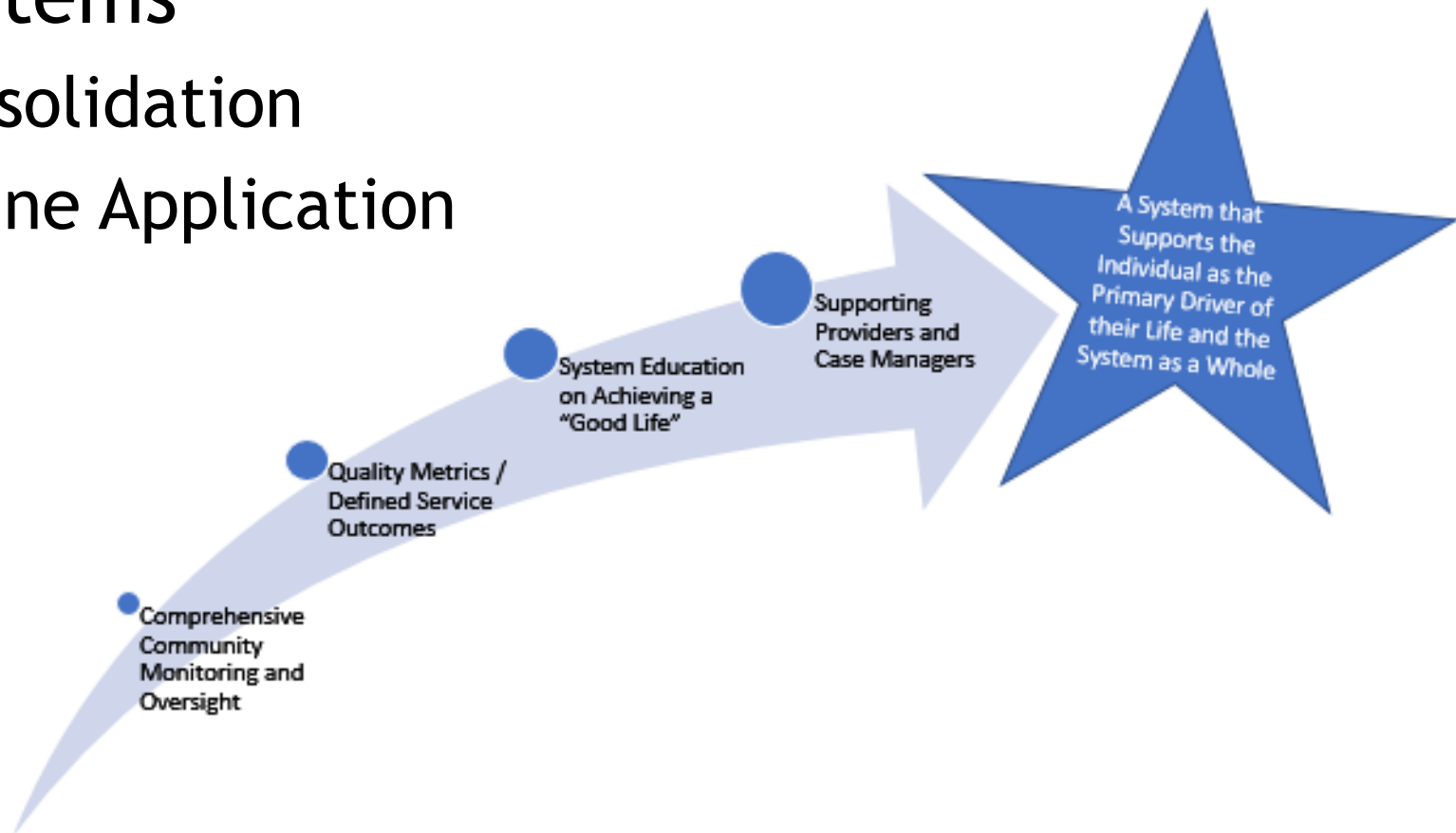
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Systems Transformation Update

- Waiver redesign
- IT Systems
 - Consolidation
 - Online Application



Scenario #1: Carl

Carl is a 38 year old who lives in a SGL with six other men. Carl has attended the same day program since moving into the SGL.

The day program that Carl has been attending has been closed due to the public health emergency. It was recently learned that the day program would not be re-opening.

The SGL provider has identified a day program in a nearby county and have informed all the men in the home that they will be able to resume day services in a couple of weeks.

Carl attended the day program in a nearby county before moving to the SGL and he did not have a good experience. He does not want to return to that day program.

Carl talks to his DSP about the fact that he does not want to attend the day program that the SGL provider is contracting with. The DSP tells the QIDP\Home Manager.



Scenario #1: Carl

An IST meeting is scheduled by the QIDP at the day, time and location of Carl's choosing.

The QIDP contacts the BDDS District Office to invite the Service Coordinator to the IST meeting and provides some background on the reason for the meeting. The BDDS Service Coordinator puts the IST meeting on his schedule and notes he would like to talk with Carl before the meeting. The BDDS Service Coordinator suggests doing some person centered planning and offers to facilitate if Carl agrees.

The BDDS Service Coordinator contacts Carl and discusses the upcoming IST meeting. The BDDS SC offers to facilitate person centered planning and explains what this would look like for Carl. Carl expressed that he does not want to go to the new day program. Carl agreed to let the SC facilitate some person centered planning so that everyone would know what is important to Carl and what his good life looks like. Carl expressed that he wanted his favorite DSP to attend as well and that he asked the Home Manager to let the DSP attend.



Scenario #1: Carl

Carl and his IST meet at the local park in a shelter house. The IST members that attended included Carl, his favorite DSP, the QIDP\Home Manager, the BDDS Service Coordinator, and a staff person from the former day program that Carl invited.

During the IST meeting, the QIDP explained that the former day program closed and the residential provider has entered into an agreement with another day program to provide services to the individuals in the SGL. Carl told the IST that he has attended the new day program before moving to the SGL and he did not like it because there was not enough to do. The QIDP noted that Carl has lived in his current home for 6 years so the day program may have changed in that time.



Scenario #1: Carl

The BDDS SC acknowledged that Carl is a hard worker and likes to stay active. The SC asked Carl what he liked about his former day service. Carl explained that there was always work to do and he was able to earn a little money.

The DSP from his former day program informed the team that Carl did a nice job on cleaning the offices at the day service site. His quality was great and he was able to complete all tasks in a timely manner once he learned each task.

Carl shared that he really liked cleaning the offices and told his team about some of the specific activities such as dusting, vacuuming, and disinfecting. Carl said he spent most of every day cleaning and that he had a checklist he followed that really helped him stay on track.



Scenario #1: Carl

The QIDP reminded Carl that he has not been to the new day program in many years and that it may have changed. Carl said he did not like it before and does not want to go there again. The DSP explained to Carl that all the other guys he lives with will be going there every day and that it might be nice for him to go too and give it a try. Carl said he would like to go to the same day program, as a couple of his housemates but that he would also like to NOT go to the same day program as some of his other housemates.

The BDDS SC acknowledged that Carl may not want to live and work with all of his housemates. The SC asked Carl if he is happy with his current home and Carl quickly affirmed that he loves his home. He said he likes some housemates more than others but that they all get along pretty well. Carl noted that he shares a room with Lou and they get along well because they share many of the same interests.



Scenario #1: Carl

The DSP asked what Carl and Lou have in common and Carl explained that they both like to keep their space neat and clean. They are also both gamers: Carl volunteered that Lou usually wins when they play games but that he does not make a big deal about always winning and does not brag about it. The BDDS SC asked what gaming system they use and Carl said they use Lou's PlayStation 4. Carl added that he does not have a gaming system but that he would like to get one when he saves up enough money.

Carl said he and Lou really like to play on-line with other gamers and that they have made some friends in far away states, which is very cool to Carl because he has never even been out of Indiana.



Scenario #1: Carl

Throughout the discussion, the SC was taking notes on both the integrated supports star and the trajectory. The integrated supports star noted:

Personal Strengths and Assets: Carl and his team note that his strengths include that he is a hard worker, likes to stay physically active, enjoys gaming, and enjoys making money through work.

Technology: Carl and his team note that Carl is proficient with gaming and gaming on line. He is able to utilize a checklist to complete tasks once he has been trained on said tasks. Carl is independent in using both residential and commercial vacuums.



Scenario #1: Carl

Community: Carl shared that he enjoys being part of the gaming community and that it has been particularly nice since the pandemic.

Relationships: Carl likes his home and his housemates though he has some housemates that he is closer too and enjoys being friends with in addition to being housemates.

Eligibility Specific: Carl shared with his team that he likes his home and liked his former day program. He is unhappy that the day program will not be re-opening but is not interested in returning to the day program he had before moving to his current home.



The trajectory noted Carl's good life includes:

- A job that keeps him busy; includes tasks that can be completed each day; pays him for his work.
- Friends that share interests such as gaming
- On-line gaming as a means to meet people who live far away
- A clean and neat environment at home and work
- Physical activity every day
- The trajectory noted that Carl does not want:
 - Lack of things to do
 - No ability to earn money
 - Sitting around with nothing to do



Scenario #1: Carl

The BDDS SC shared the notes on the star and trajectory with Carl and his team asking if there was anything incorrect or missed.

Carl added that part of his good life would be to travel out of Indiana on vacation and having a dog. The SC made those changes.

The SC asked the team what each member, including Carl, can do to help Carl on his path toward his good life.

The DSP asked Carl if he wanted a job instead of going to a day program. Carl said he was not sure what job he could do.



Scenario #1: Carl

The team discussed Voc Rehab and how their services could help Carl find a job outside of a day program location. Carl asked how much money he could make and the QIDP explained that jobs in the community must pay at least minimum wage. The DSP explained how much that is and Carl said he would REALLY like to earn more money so he can buy a gaming system.

The QIDP explained that Carl has to be involved and active in services full time and finding a job can take time. Carl asked if he could look for jobs instead of going to the new day program or perhaps work around the house noting that he could do a deep cleaning of the living area. The QIDP asked Carl if he would go see the new day program when the other guys start. Carl maintained that he does not want to go but that he would the first day just to look but did not want to stay. The QIDP thanked Carl for keeping an open mind.



Scenario #1: Carl

The QIDP and DSP discussed with Carl some things he can do around the house to stay busy and some things he can do to prepare for a community job. Carl asked that they meet again to make a schedule with him and a checklist of things to do each day. Carl said he has some ideas but wants to think of more. Another IST meeting will be scheduled in a week to develop a schedule with Carl.

The SC said he would get a contact at VR for Carl to call and make an appointment. Carl is excited to start a job search. The SC explained that he will send Carl a copy of his star and trajectory so he can share it with VR or anyone else he chooses. The SC also explained that Carl can add to or change things on the star and trajectory whenever he wants to because they are about him and his best life.



Scenario #2: David, Doug, Michael & Ben

David, Doug, Michael and Ben live in a supported living home with 24/7 supports in a provider owned and controlled setting. Prior to COVID-19 all four men were very active in their community, participating in various events and activities that they each enjoyed on their own and sometimes together. All four men are in their 30s and most are relatively healthy, except for Ben who has chronic lung disease and has a history of heart related issues. David and Doug have family members who would visit the home regularly before COVID-19. When the stay at home order was given David and Doug's family stayed away and even stayed away since the stay at home order was lifted. They have done this in response to the providers visitor restrictions set forth for the home. In addition none of the men have been participating in any outside activities per the provider's restrictions and fear of contracting COVID-19.



Scenario #2: David, Doug, Michael & Ben

As the weeks and months have passed both David and Doug have expressed on numerous occasions the desire to have their family come to the home to visit. Their families have also grown weary and requested that the provider lift the visitor restriction so that they can visit the home. Just about three weeks ago, the provider agreed to only outside visitors at this time. This has been problematic because David overheats easily and it has been very hot the last couple of weeks. In addition to being too hot many days, there have days that the visits had to be cancelled due to heavy rain.



Scenario #2: David, Doug, Michael & Ben

David and Doug's family reach out to the provider once again asking that they be allowed to enter the home for visits. The provider and staff feel very strongly that this isn't safe for Ben. When they ask Ben how he feels about visitors entering the home, Ben says that he is scared he is going to get COVID-19. Michael says he is also worried about Ben and thinks that outside visitors are okay but they shouldn't come in the home. David and Doug are very upset because they miss their families very much and don't feel that it is fair that they are told that they are not allowed to have visitors in their home. David and Doug have contacted their case managers to discuss their concerns and ask for help.



Scenario #2: David, Doug, Michael & Ben

The case managers work together to schedule a time for all four men, the provider and each of their case managers to discuss the dilemma and come up with a plan that everyone can agree to and keeps everyone safe. Doug and David's family have agreed to not participate in this meeting to allow the men to work through their dilemma together as roommates but state that they will be available by phone or text to answer any questions or join the meeting if needed.



Scenario #2: David, Doug, Michael & Ben

Throughout the discussion the case manager used the integrated supports star to determine the supports that may be available to help resolve the problem at hand.

Personal Strengths and Assets: The men have always gotten along very well as roommates and have become good friends. They care about each other's health and happiness. They are motivated to come up with a solution that will make everyone happy and keep them safe.



Scenario #2: David, Doug, Michael & Ben

Technology: The provider and case managers discuss the availability and access to face coverings for the men in the home and staff. David and Doug have a face mask because they had attempted to do outdoor visits with their family but Michael and Ben do not have their own because they have not left the house nor had visitors. The provider said that they had face masks for Michael and Ben to use. Ben says he is worried about using a face mask because he thinks he won't be able to breathe. This had not occurred to Michael so now he is having the same anxiety. The provider assures Michael and Ben that they can practice wearing them for short periods of time to see what they think and if they don't like them they will help them find something they do like. Doug and David's families are texted to ensure that they have face coverings and hand sanitizer on hand for any visits that may occur. They also discuss the supply of disinfecting wipes and hand sanitizer in the home and there was no immediate concern regarding the amount available.



Scenario #2: David, Doug, Michael & Ben

Community: The provider and case managers tell Michael and Ben that when they decide they are ready to leave the house they will have to wear a face mask out in the community so it was a good idea to start practicing now. The men reluctantly agree to give the face masks a try and start practicing wearing one for a few minutes every day.

Relationships: Michael's family lives out of the state and isn't able to visit often. Ben's parents died several years ago and he doesn't have any other family. Therefore, Michael and Ben have always enjoyed having David and Doug's family visit. David and Doug's family have always engaged with all the men in the home. Michael and Ben agree that they miss their visits as well.

Eligibility Specific: The provider, case managers and men all start to work out the details of a plan that includes temperature checks, mandatory mask wearing, social distancing, sanitizing their hands, limiting the number of persons in the home at one time as well as other protective measures.



Scenario #2: David, Doug, Michael & Ben

As a result of this discussion, the men with the support of their case managers and provider come up with the following plan:

- At this time only David and Doug's immediate family members who previously visited regularly can come for an indoor visit. Any other family members or friends will have to wait until all the men feel comfortable with more visitors inside the home but can continue to visit outside.
- On days that the weather is nice outside the family will continue their visits outside with David and Doug. On days that the weather is too hot or raining the visits can occur inside the home.
- David and Doug's family agrees to temperature checks, wearing a mask and practicing social distancing while inside the home. In addition they will sanitize their hands before coming into the home and will stay in the living room area of the home during their visit. They also agree to visits inside the home being limited to no more than three hours at a time.



Scenario #2: David, Doug, Michael & Ben

- David and Doug with the help of their support staff will disinfect the surfaces and areas that were touched during the visit as soon as the family leaves. Doug and David will then walk directly into their bedroom to change into a new clean outfit putting the dirty laundry in the hamper in their room until time to wash their own clothes. They will then wash her hands thoroughly with soap and water.
- The staff in the home will maintain social distancing from the visiting family, wear their face covering as they are always required to do and sanitize their hands at minimum during the arrival and departure of the family.



Scenario #2: David, Doug, Michael & Ben

- Michael and Ben will remain in their bedroom during the visit if they are not comfortable wearing a mask. Michael and Ben decide that they can play video games or watch a movie on Ben's TV and Play Station in his room. They will practice wearing a mask so that they can participate in the visits if they choose to with a mask on.

All the men, their families and the provider are pleased with these plans and look forward to having family visit in the home!





- The Next BDDS Meeting for Case Managers and Providers is scheduled for **September 9th** from 3:30 pm - 4:30 pm EDT
- Information on how to access the meeting will be sent via DDRS Announcement.
- BDDS / BQIS Questions:
BQIS.Help@fssa.in.gov

